

County: Outagamie
 FRANCISCAN CARE & REHAB CENTER
 2915 N MEADE ST
 APPLETON 54911 Phone:(920) 831-8700

Facility ID: 1120

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Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? Yes
 Number of Beds Set Up and Staffed (12/31/04): 192
 Total Licensed Bed Capacity (12/31/04): 200
 Number of Residents on 12/31/04: 173

Ownership: Nonprofit Church/Corporation
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 178

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	39.9	
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years	39.3	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.3	More Than 4 Years	20.8	
Day Services	No	Mental Illness (Org./Psy)	12.7	65 - 74	9.2	-----	-----	
Respite Care	Yes	Mental Illness (Other)	0.6	75 - 84	35.8	-----	100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.6	85 - 94	43.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	9.2	Full-Time Equivalent		
Congregate Meals	No	Cancer	4.6	-----	-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	4.6	100.0	-----	(12/31/04)		
Other Meals	No	Cardiovascular	30.6	65 & Over	97.7	-----		
Transportation	No	Cerebrovascular	12.1	-----	-----	RNs	12.1	
Referral Service	No	Diabetes	2.3	Gender	%	LPNs	7.4	
Other Services	Yes	Respiratory	9.8	-----	-----	Nursing Assistants,		
Provide Day Programming for Mentally Ill	No	Other Medical Conditions	22.0	Male	20.8	Aides, & Orderlies		
Provide Day Programming for Developmentally Disabled	No	-----	100.0	Female	79.2	44.3		
-----	-----	-----	-----	-----	100.0	-----		

Method of Reimbursement

Level of Care	Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care		Per Diem (\$)	Total Resi- dents	% Of All
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%			
Int. Skilled Care	0	0.0	10	8.5	0	0.0	0	0.0	0	0.0	0	0.0	0	10	5.8
Skilled Care	9	100.0	107	90.7	0	0.0	46	100.0	0	0.0	0	0.0	0	162	93.6
Intermediate	---	---	1	0.8	0	0.0	0	0.0	0	0.0	0	0.0	0	1	0.6
Limited Care	---	---	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Dev. Disabled	---	---	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0	0.0
Total	9	100.0	118	100.0	0	0.0	46	100.0	0	0.0	0	0.0	0	173	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
		% Needing Assistance of			% Totally	Total
Percent Admissions from:		Activities of	% Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	3.4	Daily Living (ADL)	15.6	49.1	35.3	173
Private Home/With Home Health	2.7	Bathing	15.6	49.1	35.3	173
Other Nursing Homes	3.1	Dressing	25.4	49.7	24.9	173
Acute Care Hospitals	88.7	Transferring	25.4	49.7	24.9	173
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	75.7	13.3	11.0	173
Rehabilitation Hospitals	0.0	Eating	*****			
Other Locations	2.1					
Total Number of Admissions	292	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.4	Receiving Respiratory Care	6.4	
Private Home/No Home Health	38.2	Occ/Freq. Incontinent of Bladder	47.4	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	22.6	Occ/Freq. Incontinent of Bowel	30.1	Receiving Suctioning	0.6	
Other Nursing Homes	2.0			Receiving Ostomy Care	0.6	
Acute Care Hospitals	8.4	Mobility		Receiving Tube Feeding	2.9	
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	24.9	Receiving Mechanically Altered Diets	24.3	
Rehabilitation Hospitals	0.0					
Other Locations	4.7	Skin Care		Other Resident Characteristics		
Deaths	24.0	With Pressure Sores	4.0	Have Advance Directives	87.3	
Total Number of Discharges (Including Deaths)	296	With Rashes	5.2	Medications		
				Receiving Psychoactive Drugs	37.0	

 Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This Facility	Other Hospital-Based Facilities		All Facilities	
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	89.0	91.7	0.97	88.8	1.00
Current Residents from In-County	82.1	85.3	0.96	77.4	1.06
Admissions from In-County, Still Residing	22.6	14.1	1.61	19.4	1.16
Admissions/Average Daily Census	164.0	213.7	0.77	146.5	1.12
Discharges/Average Daily Census	166.3	214.9	0.77	148.0	1.12
Discharges To Private Residence/Average Daily Census	101.1	119.8	0.84	66.9	1.51
Residents Receiving Skilled Care	99.4	96.2	1.03	89.9	1.11
Residents Aged 65 and Older	97.7	90.7	1.08	87.9	1.11
Title 19 (Medicaid) Funded Residents	68.2	66.8	1.02	66.1	1.03
Private Pay Funded Residents	26.6	22.6	1.18	20.6	1.29
Developmentally Disabled Residents	0.0	1.4	0.00	6.0	0.00
Mentally Ill Residents	13.3	32.7	0.41	33.6	0.40
General Medical Service Residents	22.0	22.0	1.00	21.1	1.04
Impaired ADL (Mean)*	47.5	49.1	0.97	49.4	0.96
Psychological Problems	37.0	53.5	0.69	57.7	0.64
Nursing Care Required (Mean)*	5.5	7.4	0.74	7.4	0.74